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## Application Number 09/844,153 TRANSIVITTAL Filing Date April 27, 2001 FORM First Named Inventor Eydelman Group Art Unit 2155 Examiner Name P. Tran Attenney Decket Number 126551 04

Label No.:		Attorney Dock	et Number	126551.04			
ENCLOSURES (check all that apply)							
See Transmittal Form (in duplicate; \$400.00 total fee)	Ass  (for  Dra  Dec  Lic  Pet  App  Pov Cha  Rec	signment Papers r an Application) awing(s) ( sheets) claration and Power of Newly Executed ( p. A copy from a prior a (37 CFR 1.63(d)) ( p. censing-related Papers ition ition to Convert to a Preplication wer of Attorney, Revocange of Correspondence rminal Disclaimer quest for Refund b, Number of CD(s)	Attorney ages) oplication ages) ovisional ation & e Address	After Allowance Communication to TC  Appeal Communication to Board of Appeals and Interferences  Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  Proprietary Information  Status Letter  Application Data Sheet  Request for Corrected Filing Receipt  Return Receipt Postcard  Other Enclosure(s) (please identify below):  Copy of this transmittal form.			
SIGNATURE OF ATTORNEY OR AGENT							
Signature Varid 1		eg. No.	38,222				
Name of Attorney or Agent	<del></del>	avid S. Lee					
Date August 16, Zoo5	Tel.	(425) 703-809	2 ′	Facsimile No. (425) 708-5046			
Assignee Name:	ONE MICROS	MICROSOFT CORPORATION ONE MICROSOFT WAY REDMOND, WA 98052					
Customer Number:	22971						



## Fees pursuant to the Consolidated Adjustmentons Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2005

Complete if Known				
Application Number	09/844,153			
Filing Date	April 27, 2001			
First Named Inventor	Eydelman			
Examiner Name	P. Tran			
Art Unit	2155			
Attorney Docket No.	126551.04			
Express Mail Label No.	N/A			

□ Applicant claims small en	tity status	s. See 37 CFR 1.	.27	Art Unit			2155			
	<u> </u>							6551.04		
TOTAL AMOUNT OF PAYME	(4)	400.00		Express Mail L	abel No.		N/A			
METHOD OF PAYMENT (	check all	that apply)								
☐ Check ☐ Credit Card	_ n	Money Order	☐ Non	e 🗌 Other	(please identif	fy) <u>:</u>				
□ Deposit Account Depos	it Account	Number: <u>50-0</u>	463	Deposit Ac	count Name: N	IICROSO	FT COF	RPORA	<u>ATION</u>	
For the above-identified	deposit a	account, the Dire	ctor is heret	y authorized to	: (check all th	at apply)	•			
<ul><li></li></ul>	nal fee(s	) or underpayme	nts of fee(s)		arge fee(s) in edit any overp		ow, exce	pt for th	e filing fee	
WARNING: Information on this information and authorization o			. Credit card	l information sl	hould not be i	included on	this form	ı. Provid	le credit car	
FEE CALCULATION										
1. BASIC FILING, SEAR	•									
	FILING I	rees Small Entity	SEARC	H FEES Small Entity		ATION FEE Small Entit	-			
	ee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	<u></u>	Fees P	aid (\$)	
Utility	300	150	500	250	200	100				
Design	200	100	100	50	130	65	_			
Plant	200	100	300	150	160	80			<del></del>	
Reissue	300	150	500	250	600	300				
	200	100	0	0	0	0				
2. EXCESS CLAIM FEES								Fee (\$)	Small Entit	
<u>Fee Description</u> Each claim over 20 or, for Re	siccuoc	aaah alaim aya	r 20 and m	oro than in th	a ariainal na	.tomi		50	25	
Each independent claim ove							patent	200	100	
Multiple dependent claims						_		360	180	
	ra Claim:		Fee Pa	aid (\$)	Multiple D	ependent C	laims			
17 - 37 or HP= 0  HP = highest number of total claim	e paid for	x <u>50</u>	_= <u>0.00</u> _	<del></del>	Fee (\$)	<u>Fe</u>	e Paid (\$	9)		
_	a Claims	•	Fee Pa	id (\$)	0		0			
4 - 2 or HP= 2		× 200	= <u>400.0</u>	0						
HP = highest number of indepen	ident ciair	ns paid for, it grea	iter than 3							
3. APPLICATION SIZE			_							
If the specification and draw for each additional 50 shee	vings exce ts or fract	eed 100 sheets o tion thereof. See	of paper, the 35 U.S.C. 4	application size I1(a)(1)(G) and	e fee due is \$2 37 CFR 1.16	250 (\$125 fo (s).	r small e	ntity)		
	tra Shee	Numbo		dditional 50 c			<u>a (\$)</u>	Fee	Paid (\$)	
-100 = <u>0</u>		<u> </u>		(round <b>up</b> to a	whole) numl	ber x	250	. F <u> </u>	0	
4. OTHER FEE(S)								Fee	es Paid (\$)	
Non-English Specification,	\$130	fee (no small er	ntity discour	nt)					0	
Other:		•							0	

SUBMITTED BY			
Signature	Varid S. L	Registration No. (Attorney/Agent) 38,222	Telephone (425) 703-8092
Name (Print/Type)	David/S. Lee		Date August 16, 2005

Application No.:		
Filing Date:		April 27, 2001
•		
	An Adaptive Flow Control Protocol	

## RESPONSE TO OFFICE ACTION OF JUNE 16, 2005 AMENDMENT

To:

MS: Amendment

**Commissioner for Patents** 

P.O. Box 1450

Alexandria, VA 22313-1450

From:

David S. Lee

Customer No. 22971

Sir:

In response to the Office Action of June 16, 2005, in connection with the above-identified application, the following amendments and remarks are submitted. Favorable consideration is respectfully requested.

08/18/2005 HGUTEMA1 00000059 500463 09844153 01 FC:1201 400.00 DA